Effective October 1, 2003 ### 1079 2183												
		SMALL ENTITY TYPE (OR	OTHER THAN OR SMALL ENTITY						
TOTAL CLAIMS						·	RAT	Ε	FEE]	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	BASIC FEE 3		OR	BASIC FEE	770.00
τc	TAL CHARGE	ABLE CLAIMS	6 minus 20=		•	0	XS 9)=		OR	X\$18=	
INE	EPENDENT CI	AIMS	minus 3 ±		•	X4:		=	·	OR	X86=	
MULTIPLE DEPENDENT CLAIM PRESENT							+145	i=	-	OR	+290=	
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II OTHER THA												THAN
<u>/0</u>	/0/13/04 (Column 1) (Column 2) (Column 3)								NTITY	OR	SMALL ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT	·	HIGHI NUME PREVIO PAID I	BER JUSLY	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
ĬŽ Q	Total	./6	Minus	- 0	20	=	X\$ 9	=		OR	X\$18=	
ME	Independent	• /	Minus	***	3	-	X43:	-		OR	X86=	·
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							=		OR	+290=	
								AL		OR	, TOTAL ADDIT, FEE	
(Column 1) (Column 2) (Column 3)								EE L			AUUN. FEET	
ENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	EST BER USLY	PRESENT EXTRA	RATE	E .	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	44		=	X\$ 9	-		OR	X\$18=	
	Independent	*	Minus	***		=	X43=	.]		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							-		OR	+290=	
								AL EE	•	OR	TOTAL ADDIT, FEE	
(Column 1) (Column 2) (Column 3)									•	٠.		•
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	•	HIGHE NUME PREVIO PAID F	IER USLY	PRESENT EXTRA	RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	desk		=	X\$ 9=	. T		ÓВ	X\$18=	
ME	Independent	•	Minus	***		e	X43=	1		OR	X86=	
۷	FIRST PRESE	NTATION OF MU	ILTIPLE DEF	PENDENT	CLAIM			+				
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. +145= OR +290= TOTAL OP TOTAL												
**	f the "Highest Nu If the "Highest Nu	mber Previously Pa mber Previously Pa ber Previously Pak	id For IN THI	S SPACE is S SPACE is	less that	n 20, enter "20." n 3, enter "3."	ADDIT. FI	EE L		•	ADDIT. FEE	

Application or Docket Number